

### Health Services Unit Internal Management Procedures

# Internal Management Procedure MED.IMA.001

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He	alth Appraisals at Rece	ption	
Effective Date: June 1, 2005	Revised/Reviewed: July 2020	Authority: NJ DOC PS MED.001.008	
Promulgating Office: Health Services Unit  Authentication Statement		Professional Standard cited: ACA 4-4362, 4-4363 NCCHC P-E-04, P-E	
<b>Applicability</b> : This Internal Mana Institutions.	gement Procedure applie	s to all Medical Unit S	taff of all DOC

This document is scheduled for annual review on or about January 2021

**PURPOSE** 

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**Review Schedule:** 

To establish procedures that ensure the health status of each inmate has been comprehensively appraised within 72 hours of reception into the prison system.

#### **II DEFINITIONS**

The following words and terms, when used in this policy, shall have the following meanings, unless the context clearly indicates otherwise:

Intake Screening on Reception (N.J.A.C. 10A:16-2.11) refers to a (1) medical history, (2) physical examination, (3) pregnancy test (females), (4) notation of any disabilities that might qualify under the *Americans with Disabilities Act*, and (5) other laboratory studies deemed

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necessary by the NJDOC Director of Medical Services. Steps (1) - (5) are completed on all new admissions within 24 hours.

**Comprehensive Health Appraisal** means the initial, complete medical history and physical examination done by a Nurse Practitioner/Physician/Physician Assistant (NP/MD/DO/PAC) and review and signing of the results of all x-rays, lab tests and any other diagnostic test ordered with documentation of same in the Electronic Medical Record. This occurs within 72 hours of admission.

**Interpretation** means the act of listening to a communication in one language and orally converting it into another language, while maintaining the same meaning.

**Language Line** means an over-the-phone telephone interpretation system that permits the oral transmission of a message from one language into another language for those inmates who are LEP. Language Line Service interpreters listen to the limited English proficient (LEP) customer, analyze the message and accurately convey its original meaning to the NJDOC staff member.

**Limited English Proficient (LEP)** means the limited ability to read, write, speak, or understand English.

**LEP inmate** means an inmate who has a limited ability to read, write, speak, or understand English.

**Translation** means the act of converting a written document from one language to another while ensuring that the integrity of the document remains unchanged.

Clinician means a State licensed physician, except if the clinician makes mental health evaluations, the term shall mean a State licensed psychiatrist or psychologist, or an advanced practice nurse or clinical nurse specialist with a specialty in psychiatric nursing.

Member of a Vulnerable Population means:

- Inmate is 21 yrs of age or younger;
- Inmate is 65 yrs of age or older;
- Inmate has a disability based on a mental illness;
- Inmate has a history of psychiatric hospitalization, or has recently exhibited conduct including by not limited to serious self-mutilation, indicating the need for further observation or evaluation to determine the presence of mental illness;
- Has a developmental disability;
- Has a serious medical condition which cannot effectively be treated in isolated confinement;

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- Is pregnant, is in the postpartum period, or has recently suffered a miscarriage or terminated a pregnancy;
- Has a significant auditory or visual impairment;
- Is perceived to be lesbian, gay, bisexual, transgender, or intersex.

#### III POLICY

The New Jersey Department of Corrections mandates that a comprehensive health appraisal of each new admission inmate, including medical history and physical examination, identifying any inmate who is determined to be LEP and the languages they speak, and is a member of a vulnerable population, specifically in terms of possessing developmental disability, mental illness and a serious medical condition which cannot effectively be treated in isolated confinement, is pregnant, postpartum or has recently suffered a miscarriage or terminated a pregnancy, has a significant auditory or visual impairment. This is to be completed within seventy-two (72) hours after admission to a reception facility. The health history and vital signs are taken by qualified and trained healthcare staff members and the physical examinations are performed by a New Jersey licensed Nurse Practitioner, Physician Assistant, or Physician.

Intrasystem transfers will have the appropriate EMR form completed at the sending facility before departure. Nursing staff at the receiving facility will complete a face to face encounter to include a PREA assessment screening and document a chart review to include a detailed review of the transfer summary with particular emphasis upon medication continuity, attention to pending appointments, and identification of ongoing mental health needs. In no case will this occur more than 12 hours from arrival.

Health appraisals will be completed at the receiving facility if an inmate is transferred from the reception center prior to the completion of the health appraisal. The health appraisal includes:

- A. Review or completion of the History and Screening Encounter information on the electronic medical record,
- B. Identifying LEP (Limited English Proficient) inmates and the languages they speak. Documentation of LEP should documented in the electronic medical record and staff should utilize approved Language Line Service vendors that are under service contract.
- C. Collection of additional data to complete the medical, dental, mental health and immunization histories. For LEP identified inmates they should be advised that NJDOC will provide free interpretation and translation services relative to inmate programming, safety, medical and quasi-legal proceedings.

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- D. Blood-borne pathogens risk assessment,
- E. Routine screening for tuberculosis, HIV, breast carcinoma (females), cervical cancer and pregnancy,
- F. Recording of height, weight, pulse, blood pressure and temperature,
- G. Physical examination, including review of mental status,
- H. Observation of inmate's teeth and gums to identify any gross abnormalities requiring immediate referral to the dentist,
- I. Pap smears and pelvic exams for female inmates,
- J. Other tests and examinations as medically indicated,
- K. Inmate instruction in oral hygiene,
- L. Review of the results of the medical examination, tests, and identification of problems by a physician within 72 hours of admission,
- M. Dissemination of all HIV test results to inmates (positive or negative) and other test results as medically or professionally appropriate.
- N. Initiation of therapy and immunizations when appropriate,
- O. Development and implementation of a treatment plan to include diet, housing disposition, job assignment and program participation,
- P. Documentation of any disabilities that may qualify under the *Americans with Disabilities Act* and thus require special accommodations, including translation services for inmates who are determined to be Limited English Proficient (LEP).
- Q. Documentation of any conditions relevant to the *Prison Rape Elimination Act of 2003* (PREA) that require special accommodations or notifications,
- R. Assignment to Chronic Care Clinic, if appropriate,

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- S. The use of alcohol and/or drugs, including types of substances used, mode of use, amounts used, frequency of use, and date or time of last use,
- T. Whether the inmate is taking medication for an alcohol or drug abuse problem.
- U. When indicated, additional investigation will be carried out regarding:
  - 1. Whether the inmate is taking medication for a psychiatric disorder and if so, what drugs, and for what disorder.
  - 2. Current or past illness and health problems related to substance abuse such as hepatitis, seizures, traumatic injuries, infections, or liver diseases.

### IV PROCEDURES

The initial step to any medical screening/appraisal must be to determine if the inmate is proficient in English and, if not, the primary language of the inmate. Should any inmate not be proficient in English, or if they have been previously identified as an "LEP inmate", arrangements shall be made to access the Language Line for assistance.

Staff are to follow the procedures indicated in *NJDOC Policy SUP.4.1*, *Limited English Proficient (LEP Language Assistance: Use of the Language Line*. At no time, except in emergency situations shall DOC/Vendor staff or other inmates be utilized to interpret or translate any medical information to an LEP inmate patient.

#### A. INTAKE SCREENING:

- 1. At any reception unit (new admission) immediately upon receipt of an inmate, a health care staff member will perform a brief medical screening to ensure timely continuity of care. This screening will be composed of a review of all available medical records and a brief interview of the inmate to ensure attention to:
  - a. Any obvious acute or contagious conditions requiring care.
  - b. Any medications that must be provided or continued.
  - c. Identifying Limited English Proficient inmates and the languages they speak
  - d. Mental Health Screening to include:
    - Past psychiatric hospitalizations (when and where)
    - Suicide intent and/or suicide attempt history

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Intent to hurt self or others

The Intake Screening Encounter on the electronic medical record will be completed in accordance with the current Electronic Medical Record Workflow and needs to document any inmate with limited English proficient (EP) needs.

- 2. Inmates will be scheduled for an admission physical and complete history within 24 hours of arrival at the reception center. The physical examination will include but not be limited to the following:
  - a. Review of the Intake Screening and history in the electronic medical record.
  - b. Review of all available Medical/Dental Records.
  - c. A complete history, including blood borne pathogens risk assessment and physical examination with all findings recorded.
  - d. The Physical Assessment in the electronic medical record will be completed by a New Jersey licensed Physician Assistant, Physician, or NP. The Dental Screening will be completed and documented in the Electronic Medical Record.
  - e. Vision and hearing screening.
  - f. Screening for any disability that might be qualifying under *Americans with Disabilities Act* and any required accommodations, including any LEP needs and Language Line Services/translation services needed.
  - g. Screening for any condition relevant to the *Prison Rape Elimination Act of 2003* (PREA) and recording of those findings in the electronic health records system,
  - h. Screening for any condition relevant to the inmate(s) being considered a member of a vulnerable population in accordance with N.J. Stat. 30:4-82.7 governing issues relative to isolated confinement.
  - i. Hepatitis C (HCV) antibody testing for all inmates born between 1945 and 1965 as per CDC Guidelines.
  - j. Chest X-ray where clinically indicated.
  - k. Mantoux/PPD skin test for tuberculosis in accordance with the Department of Corrections Policy 14.01 Title: Tuberculosis Control Program for Inmates.

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- I. Specific examination for ectoparasites (scabies and lice)
- m. The ordering of laboratory tests deemed medically appropriate, to include the following screening tests at a minimum:
  - For female inmates, a cervical Papanicolaou Smear, pregnancy test and screening mammography at age 50 and above,
  - An HIV test with opt-out option,
  - Mantoux test for MTB
- 3. HIV testing will be completed at intake for both male and female inmates. This will be done in accordance with CDC guidelines published September, 2006 (Morbidity and Mortality Weekly Report. Recommendations and Reports September 22, 2006 / Vol. 55 / No. RR-14). As part of that protocol:
  - 1. Phlebotomists shall notify inmates that they are receiving an HIV test.
  - 2. Any inmate may refuse HIV testing without explanation.
  - 3. There is no required pre-test or post-test counseling.
  - 4. There will be no separate signed consent required for HIV testing.
  - 5. HIV test refusals will be documented.
  - 6. HIV testing does not have to be repeated if there is documented proof of a prior <u>positive</u> HIV test.
  - 7. All prior HIV negative tests will be repeated at *intake*.

Medical/Dental Records from prior incarcerations will be requested.

- 4. If a Medical/Dental Record is not located, a new medical reference file will be generated. The inmate will have a comprehensive appraisal completed and documented in the electronic medical record.
- 5. The Physician/NP/PA-C, if indicated, will order additional testing. Treatments will be initiated as ordered by the Physician, PA-C or NP.
- 6. Referrals to dental and mental health will be initiated, based on the findings during the intake process.

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### **B. COMPREHENSIVE HEALTH APPRAISAL:**

- At any reception unit, a Comprehensive Health Appraisal will be complete within 72 hours of admission of an inmate. The inmate's Comprehensive Health Appraisal will include:
  - a. The Initial History and Physical Examination, with all available laboratory test results. The physician or NP must have recorded any diagnosis, and orders for medication, treatment, specialty referrals, etc.
  - b. The Initial Dental Screening including panoramic x-ray.
  - c. The Initial Mental Health Screening.
- 2. Based upon this Comprehensive Health Appraisal:
  - a. Orders must be written for any necessary medication or treatment.
  - b. Communication to the appropriate Institutional Authority/designee on any recommendations regarding housing, disabilities etc. Each facility must have written procedures regarding communication to the Security Staff of any restrictions for housing and job assignments.

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### ADULT DIAGNOSTIC AND TREATMENT CENTER

Inmates with a sexual offense may be admitted directly to this facility and therefore have their intake completed at this facility.

#### **BAYSIDE STATE PRISON**

### CENTRAL RECEPTION AND ADMISSION FACILITY

The majority of male Inmates have their intake completed at this Facility. In unusual circumstances any facility can perform the required intake as per this procedure

### EAST JERSEY STATE PRISON

### EDNA MAHAN CORRECTIONAL FACILITY FOR WOMEN

All female Inmates have their intake completed at this facility.

GARDEN STATE YOUTH CORRECTIONAL FACILITY

MID-STATE CORRECTIONAL FACILITY

MOUNTAINVIEW YOUTH CORRECTIONAL FACILITY

**NEW JERSEY STATE PRISON** 

NORTHERN STATE PRISON

SOUTHERN STATE PRISON

SOUTHWOODS STATE PRISON